

ASSISTANT COMMISSIONER OF PATENTS AND TRADEMARKS  
Washington, DC 20231

PATENT

Date: August 13, 2001

File No. 1650.65513



Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): Dr. Arthur Palmer

For: BLOOD PUMP

I hereby certify that this paper is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: Asst. Comm. for Patents, Washington, D.C. 20231, on this date. Express Label No. EL 846174367 US

8/13/01  
Date

L. Nelson

Enclosed are:

- (X) 29 pages of specification, including 31 claims and an abstract.
- (X) an executed oath or declaration, with power of attorney.
- ( ) an unexecuted oath or declaration, with power of attorney.
- ( )      sheet(s) of informal drawing(s).
- (X) 6 sheet(s) of formal drawings(s).
- ( ) Assignment(s) of the invention to                                 .
- ( ) Assignment Form Cover Sheet.
- ( ) A check in the amount of \$      to cover the fee for recording the assignment(s) is enclosed.
- ( ) Information Disclosure Statement.
- ( ) Form PTO-1449 and cited references.
- ( ) Associate power of attorney.
- ( ) Priority Document.
- ( ) Request for Corrected Filing Receipt

Fee Calculation For Claims As Filed

- a) Basic Fee \$ 710.00
- b) Independent Claims 6 - 3 = 3 x \$ 80.00 = \$ 240.00
- c) Total Claims 31 - 20 = 11 x \$ 18.00 = \$ 198.00
- d) Fee for Multiple Claims \$260.00 = \$

Total Filing Fee \$ 1148.00

- (X) Applicant is an independent inventor and Small Entity, reducing Filing Fee by half to \$ 574.00
- (X) A check in the amount of \$ 574.00 to cover the filing fee is enclosed.
- ( ) Charge \$            to Deposit Account No. 07-2069.
- ( ) Other   .

- (X) The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 C.F.R. §§1.16-1.17, or credit any overpayment, to Deposit Account No. 07-2069. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 07-2069. A duplicate copy of this sheet is enclosed.

300 S. Wacker Drive.  
Suite 2500  
Chicago, Illinois 60606  
(312) 360-0080  
Customer No. 24978

GREER, BURNS & GRAY, LTD.

By:                                   
Paul G. Juettner  
Registration No. 30,270